PART B - FEE(S) TRANSMITTAL

complete and send this form, together with applicable fee(s), to: Mail Mail Stop 155UE FEE Commissioner for Pate

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

DEC 1 7 2008	<u>u</u> )	<del></del>			Alexandria, Virginia 22313-1450 (571)-273-2885		
INSTRUCTIONS: THE appropriate Appropriate unless correct maintenance fee notifica	form should be used correspondence includied below or directed ot tions.	for transmitting the ISSI ng the Patent, advance o herwise in Block 1, by (	JE FEE and PUBLIC rders and notification a) specifying a new c	CATION FEE (if req of maintenance fees orrespondence addres	uired). Blocks I throug will be mailed to the c s; and/or (b) indicating	gh 5 should be completed where current correspondence address as a separate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				(Depositor's name)			
				(Signature)			
					<del></del>	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET	NO. CONFIRMATION NO.	
10/520,160	01/25/2005		John Lillington		550-609	9546	
FITLE OF INVENTION	: FREQUENCY CONT.	ENT SEPARATION USI	NG COMPLEX FREC	QUENCY SHIFTING	CONVERTERS		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE PREV. PAID ISS	UE FEE TOTAL FEE(S	S) DUE DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0 12/18/	\$1810 <b>2008 SKOHAKKI 0000</b>		
EXAMINER ART UNIT			CLASS-SUBCLASS			1510.00 OP	
SINGH, HIRDEPAL 2611			375-344000	02 FC:	1504	300.00 OP	
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, fist  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  R.F. ENGINES LIMITED  Isle of Wight, United Kingdom  Please check the appropriate assignee category or categories (will not be printed on the patent):							
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 5  Advance Order - # of Copies 5  Advance Order - # of Copies 5  Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).							
a. Applicant claim	tus (from status indicates s SMALL ENTITY states	is. See 37 CFR 1.27.			ALL ENTITY status. Sec		
nterest as shown by the r	ecords of the United Sta	tes Datent and Trademark	Office.	nan me appircant; a re	gisicicu automey or agen	nt; or the assignee or other party in	
Authorized Signature Date December 17, 2008							
Typed or printed name Stanley C. Spooner Registration No. 27,393							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.